

**—AMENDED—
PERIODIC WITHHOLDING TAX RETURN**

DO NOT WRITE IN THIS AREA

32

NAME: _____

☐ MONTH OF _____, _____☐ QUARTER OF _____, _____

HAWAII WITHHOLDING I.D. NO. _____

1	TOTAL WAGES PAID (INCLUDING COLA)				1
2	TOTAL HAWAII INCOME TAX WITHHELD				2
3	PENALTY				3
4	INTEREST				4
5	TOTAL AMOUNT DUE (ADD LINES 2, 3, AND 4)				5
6	TOTAL TAXES PAID FOR THE PERIOD	6			6
7	PENALTY PAID DURING THE PERIOD	7			7
8	INTEREST PAID DURING THE PERIOD	8			8
9	TOTAL PAYMENTS MADE (ADD LINES 6, 7, AND 8)				9
THIS SPACE FOR DATE RECEIVED STAMP		10	AMOUNT OF TAX NOW DUE AND PAYABLE (LINE 5 MINUS LINE 9)		10
		11	FOR LATE FILING ONLY:		
		11a	PENALTY →		11a
		11b	INTEREST →		11b
		12	AMOUNT OF CREDIT TO BE REFUNDED (LINE 9 MINUS LINE 5)		12
		13	PLEASE ENTER AMOUNT OF PAYMENT (See Instructions.) PAY IN U.S. DOLLARS DRAWN ON ANY U.S. BANK MAKE CHECK PAYABLE TO: HAWAII STATE TAX COLLECTOR		13
		I DECLARE UNDER THE PENALTIES SET FORTH IN SECTION 231-36, HRS, THAT THIS IS A TRUE AND CORRECT RETURN, PREPARED IN ACCORDANCE WITH THE WITHHOLDING PROVISIONS OF THE HAWAII INCOME TAX LAW AND THE RULES ISSUED THEREUNDER.			
		SIGNATURE _____ TITLE _____ DATE _____			

● ATTACH CHECK OR MONEY ORDER AND FORM VP-1 HERE ●

INSTRUCTIONS**THIS FORM IS ONLY USED AFTER THE ORIGINAL PERIODIC
WITHHOLDING RETURN, FORM HW-14, HAS BEEN FILED.**

File this form with the district office with which the original return was filed. See mailing addresses below.

Do NOT use this form if the Employer's Return and Reconciliation of Hawaii Income Tax Withheld From Wages, Form HW-3, has already been filed for the year. If Form HW-3 has been filed, use the Amended Employer's Return and Reconciliation of Hawaii Income Tax Withheld From Wages, Form HW-23, to make any corrections.

1. Enter your name, the filing period, and your Hawaii withholding I.D. number.
2. Enter on lines 1 through 5 the correct amounts which should have been reported on the original Periodic Withholding Return, Form HW-14. Entries which were correctly reported on the original return also must be entered on the appropriate line. Failure to do so will result in a change from the correct amount to -0-.
3. Enter on lines 6 through 8 the amounts of any tax withheld, penalty, and interest, respectively, paid with the original periodic return. Include payments made with the original return as well as any supplemental payments made after the original return was filed. REMINDER: Any payment made first offsets any interest due, then penalty, then tax due.
4. Add lines 6 through 8 and enter the total amount on line 9.
5. If line 5 is more than line 9, subtract line 9 from line 5 and enter the result on line 10. If the amended return is being filed after the original due date of the

periodic return, enter the amount of any additional penalty or interest on lines 11a and 11b.

6. If line 5 is less than line 9, subtract line 5 from line 9 and enter on line 12 the amount of credit to be refunded.
7. Enter on line 13 the amount of payment being made with the amended return. Complete Form VP-1. Attach a check or money order payable to "Hawaii State Tax Collector" and Form VP-1 to Form HW-20. Write "HW", the filing period, and your Hawaii withholding I.D. number on the check.
8. Prepare a duplicate copy of this amended return for your files.
9. Sign the amended return and file it with the district office with which the original return was filed. See mailing addresses below.

MAILING ADDRESSES:**OAHU DISTRICT OFFICE**
P.O. BOX 3827
HONOLULU, HI 96812-3827
Telephone: 808-587-4242
Toll Free: 1-800-222-3229**MAUI DISTRICT OFFICE**
P.O. BOX 923
WAILUKU, HI 96793-0923
Toll Free: 1-800-222-3229**HAWAII DISTRICT OFFICE**
P.O. BOX 937
HILO, HI 96721-0937
Toll Free: 1-800-222-3229**KAUAI DISTRICT OFFICE**
P.O. BOX 1686
LIHUE, HI 96766-5686
Toll Free: 1-800-222-3229